

UNITED STATES DISTRICT COURT

District of _____

T. Rowe Price Tax-Free High
Yield Fund Inc., et al.

SUMMONS IN A CIVIL CASE

V.

Karen M. Sughrue, et al.

CASE NUMBER:

TO: (Name and address of Defendant)

04-11667 RGS

Corporation Service Company
Registered Agent for Advest, Inc.
84 State Street
Boston, MA 02109

YOU ARE HEREBY SUMMONED and required to serve on PLAINTIFF'S ATTORNEY (name and address)

Thomas G. Hoffman, Esq.
Greene & Hoffman, P.C.
125 Summer Street, Suite 1410
Boston, MA 02110

an answer to the complaint which is served on you with this summons, within 20 days after service of this summons on you, exclusive of the day of service. If you fail to do so, judgment by default will be taken against you for the relief demanded in the complaint. Any answer that you serve on the parties to this action must be filed with the Clerk of this Court within a reasonable period of time after service.

TONI ANASTAS

JUL 27 2004

CLERK

DATE

(By) DEPUTY CLERK



Suffolk County Sheriff's Department • 45 Bromfield Street • Boston, MA 02108 • (617) 989-6999
Suffolk, ss.

(1) As to

October 26, 2004

I hereby certify and return that on 10/21/2004 at 2:30PM I served a true and attested copy of the Summons and Complaint in this action in the following manner:
 To wit, by delivering in hand to B.Montanez, Process Clerk & agent in charge at time of service, for Advest, Inc., at , C/O Coproation Service Company, 84 State Street Boston, MA. U.S. District Court Fee (\$5.00), Basic Service Fee (IH) (\$30.00), Travel (\$1.00), Postage and Handling (\$1.00), Attest/Copies (\$5.00) Total Charges \$42.00

John Cotter
 Deputy Sheriff

Deputy Sheriff John Cotter

Address of Server

Signature of Server

Date

Executed on

I declare under penalty of perjury under the laws of the United States of America that the foregoing information contained in the Return of Service and Statement of Service Fees is true and correct.

DECLARATION OF SERVER

TOTAL

SERVICES

TRAVEL

STATEMENT OF SERVICE FEES

☐ Other (specify):

☐ Returned unexecuted:

☐ Name of person with whom the summons and complaint were left:

☐ Left copies thereof at the defendant's dwelling house or usual place of abode with a person of suitable age and discretion then residing therein.

☐ Served personally upon the defendant. Place where served:

Check one box below to indicate appropriate method of service

TITLE

NAME OF SERVER (PRINT)

DATE

Service of the Summons and complaint was made by me

RETURN OF SERVICE

01025161